



CAMELFORD RURAL DISTRICT COUNCIL

ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

for the year

1965

Health Area Office,
Launceston,
Cornwall.

WILLIAM PATERSON, M.B., Ch.B., D.P.H.
Medical Officer of Health

CAMELFORD RURAL DISTRICT COUNCIL

Members of the Public Health Committee 1965

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Cllr. M.OLDE - Vice-Chairman.

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" S.Adams
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" A.D.Wroth

Public Health Officers of the Local Authority :

Medical Officer of Health

W.Paterson, M.B.Ch.B., D.P.H.

also holds appointments of :

Medical Officer of Health - Launceston Rural District Council
Launceston Borough Council
Bude-Stratton Urban District Council
Stratton Rural District Council

Assistant County Medical Officer - Area 6 Cornwall County Council

School Medical Officer :

Cornwall County Council

Public Health Inspector :

R.R.Haylett, F.R.S.H., M.A.P.H.I.

SUMMARY OF VITAL STATISTICS

Area (in acres)	52,544
Population	6,920
No. of separate dwellings occupied	2,498
Rateable Value 1965	£164,771
Product of ld. rate	£652. 6. 7d.

<u>Live Births</u>	<u>Total</u>	<u>Male</u>	<u>Female</u>	<u>Rate per 1,000 estimated population</u>
Legitimate	82	51	31	12.57
Illegitimate	5	2	3	
<u>Stillbirths</u>	<u>2</u>	<u>-</u>	<u>2</u>	<u>22.47 per 1,000 total births</u>
<u>Deaths</u> (all causes)	116	54	62	16.76
Deaths from Puerperal Causes -		NIL		
Puerperal and post-abortive sepsis		NIL		
Other Puerperal Causes -		NIL		

Infant Mortality (Deaths under 1 year per 1,000 live births)

1	1	-	11.49
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	<u>Male</u>	<u>Female</u>	<u>Total</u>
Deaths from Cancer (all ages)	10	9	19
Measles (all ages)			NIL
Whooping Cough (all ages)			NIL
Diarrhoea (under 2 years)			NIL

To the Chairman and Councillors of the Rural District of Camelford.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present the Annual Report of the Medical Officer of Health for the year 1965.

The vital statistics show a decline of seven in the number of births, while deaths increased by 27. This reversed the favourable balance of births over deaths recorded in previous years, deaths in 1965 outnumbering births by 29. The estimated mid-year population fell from 6960 in 1964 to 6920. Heart disease, vascular lesions of the nervous system and cancer, in that order, were at the head of the list of causes of death. One infant death and two stillbirths were recorded.

The incidence of notifiable infectious disease was remarkably low. Of the total of seven cases notified, however, three were of respiratory tuberculosis. Although this disease has slowly declined over the past few years, the need for care has not diminished, and the follow-up service to ensure the examination of contacts, not only of cases or of suspect cases, but of schoolchildren who are found to have a marked tuberculin reaction on routine tuberculin testing at school, is of the utmost importance.

In the sanitary circumstances of the District, the Council progressed with its housing programme. In view of difficulties which had been experienced for some time at the Delabole Sewage Disposal Works, and which had been under investigation, the Council instructed its Consulting Engineers to prepare a scheme for the reconditioning of the works. In the field of water supply, the publication of the North and Mid Cornwall Water Draft Order foreshadowed the regrouping of the undertakings of the North Cornwall Water Board, the Newquay and District Water Company and those of the Mid-Cornwall Area. The rise in demand for water and the increasing complexity of supply and treatment is the reason for regroupings such as this, which no doubt is a forerunner of organisations covering even larger areas. While there may be justifiable regrets for the disappearance of the local touch, what really matters is the provision of an ample and pure supply of water for the districts concerned.

I should like to express my thanks to Mr. Haylett, the Council's Surveyor and Public Health Inspector, for his valuable assistance in the preparation of this report and in all aspects of our work together. To Mr. Hawkey, the Clerk of the Council, and his staff, I am indebted for much help and I am glad to continue the record of my appreciation of the co-operation of the General Medical Practitioners of the district,

It is a pleasure, once again, to acknowledge the Council's constant encouragement and support.

I have the honour to be,

Your obedient Servant,

WILLIAM PATERSON

Medical Officer of Health

NATURAL AND SOCIAL CONDITIONS

Area (in acres) 52,544. Camelford Rural District extends from Delabole Point in Port Isaac Bay to Strangles Beach, north of Boscastle, inland to St. Clether and south to St. Breward, and consists for the most part of three plateaux 400 ft. 700 ft. and 1,100 ft. above sea level.

The geology of the District is very complex, due to much faulting and over-thrusting. The rocks in the area west of the River Camel are Upper Devonian, and it is in these beds that the famous Delabole Slate has been quarried for several centuries. Along the northern boundary running east to west is the Davidstow anti-cline, the northern flank of which disappears under the culm measures near Boscastle.

The beds in the anti-cline can be seen in the Tintagel Cliff Sections. Black shales, slates and volcanics are well exposed. East of the River Camel is the granite mass of Bodmin Moor and at St. Breward a fine silver-grey granite of the highest quality is quarried.

Population - The Registrar General has estimated the population for the mid-year 1965 to be 6,920 compared with 6,960 in the previous year.

Deaths. The total number of deaths assigned to the District for the year was 116 compared with 89 for 1964. The crude death rate based on the mid-year population was 16.76 compared with 12.787 in the previous year.

The following table has been compiled for comparison with previous years :

<u>Year</u>	<u>Total</u>	<u>Male</u>	<u>Female</u>	<u>Recorded Rate</u>
1961	106	53	53	15.79
1962	112	50	62	16.30
1963	100	51	49	14.53
1964	89	47	42	12.787
1965	116	54	62	16.76

In order to compare the mortality in the District with the mortality for England and Wales, it is necessary to make a correction to allow for the difference in age and sex distribution of the two populations. This is done by applying to the crude death rate of the District, an "Area Comparability Factor" which has been estimated by the Registrar General as 0.68 for the District.

The Standardised Death Rate, therefore, is 11.396 which may be compared with that of 11.5 (provisional) for England and Wales.

Births. The number of live births assigned to this District was 87 compared with 94 in 1964. The rate per thousand of the population was 12.57. When the Registrar General's Area Comparability Factor for births (1.24) is applied to this figure, the Standardised Birth Rate of 15.586 for this District compares with 18.1 (provisional) for England and Wales.

Stillbirths. There were two stillbirths during 1965.

Illegitimate Births. There were five illegitimate births assigned to this District during the year, two male and three female, compared with 2 in 1964. Shown as a proportion of the total number of live births, this represents 5.74 per cent.

Maternal Mortality. No case of death during pregnancy was recorded.

Infant Mortality. There was one infant death in 1965.

<u>Sex</u>	<u>Age</u>	<u>Cause of Death</u>
M	10 hours	Prematurity

NOTE: Vital Statistics. It is important that too much weight should not be attached to small variations in these rates from one year to the other, particularly where relatively small populations are involved - attention should rather be paid to the trend of these rates over a period of years.

MORTALITY TABLE

<u>Causes of Death</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
1. Tuberculosis, respiratory	1	1	2
2. Tuberculosis, o'her	-	-	-
3. Syphilitic disease	-	-	-
4. Diphtheria	-	-	-
5. Whooping Cough	-	-	-
6. Meningococcal infection	-	-	-
7. Acute poliomyelitis	-	-	-
8. Measles	-	-	-
9. Other infective and parasitic diseases	-	-	-
10. Malignant neoplasm, stomach	4	1	5
11. Malignant neoplasm, lungs, bronchus	1	1	2
12. Malignant neoplasm, breast	-	2	2
13. Malignant neoplasm, uterus	-	-	-
14. Other malignant and lymphatic neoplasms	5	5	10
15. Leukaemia, aleukaemia	-	-	-
16. Diabetes	-	-	-
17. Vascular lesions of the nervous system	7	17	24
18. Coronary disease, angina	8	6	14
19. Hypertension with heart disease	1	2	3
20. Other heart disease	13	18	31
21. Other circulatory disease	4	3	7
22. Influenza	-	-	-
23. Pneumonia	1	1	2
24. Bronchitis	3	1	4
25. Other diseases of respiratory system	1	-	1
26. Ulcer of stomach and duodenum	-	-	-
27. Gastritis, enteritis and diarrhoea	-	-	-
28. Nephritis and nephrosis	1	1	2
29. Hyperplasia of prostate	-	-	-
30. Pregnancy, childbirth, abortion	-	-	-
31. Congenital malformations	-	-	-
32. Other defined and ill-defined causes	4	1	5
33. Motor vehicle accidents	-	1	1
34. All other accidents	-	1	1
35. Suicide	-	-	-
36. Homicide and operations of war	-	-	-

GENERAL PROVISION OF HEALTH SERVICES

General Medical Services

General medical services under Part IV of the National Health Service Act, 1946, are provided by medical practitioners resident in the district and in adjoining districts, all of whom undertake maternity medical services.

County Council Services.

I Health Department. The County Council is the local health authority for the purposes of Part III of the National Health Service Act, 1946, and provided the following services in the district :-

- (a) Midwifery and Home Nursing : Nurse-midwives are provided to attend general nursing and midwifery cases in the home.
- (b) Health Visiting. Health Visitors are available to give advice on health matters in the home or at the clinic. Originally concerned with the care of mothers and young children, which is still their basic function, they are increasingly concerned with other age groups, particularly the aged. Some health visitors combine this work with general nursing and midwifery. All act also as school nurses.
- (c) Infant Welfare Centre : Monthly Infant Welfare Clinics are held at Camelford and Delabole.
- (d) Dental Clinic : Priority dental treatment for expectant and nursing mothers and pre-school children is available at the Dental Clinic at the Health Clinic, Launceston, and at Wadebridge.
- (e) Vaccination and Immunisation. Facilities for vaccination against smallpox and immunisation against diphtheria, whooping cough and tetanus, and for poliomyelitis vaccination, are provided at the Child Welfare Clinic or by the supply of materials to the family doctor.
- (f) Home Help Service : Home helps are employed to provide domestic help for households in certain circumstances, a charge being made for this service according to the means of the person concerned.
- (g) Ambulance Service : A service of ambulances for the conveyance of sick, accident and emergency cases is provided. For sitting cases, utilecon sitting case vehicles are used. When appropriate, some such cases are carried by the Hospital Car Service, a voluntary organisation. Day-to-day administration of the service is carried out from Ambulance Control, Bodmin.

(h) Prevention of Illness, Care and After-care : A full-time tuberculosis health visitor is provided for the care and after-care of tuberculous persons. District nurses are available to assist in the home treatment of such persons when required by the Chest Physician or family doctor. Routine tuberculin testing and, if necessary, B.C.G. vaccination (i.e., vaccination against tuberculosis) is provided for senior school children.

Certain special investigations are carried out in other types of illness by district health visitors, while health education is carried out by the County's medical and nursing staff.

(i) Mental health : The County Council has certain responsibilities in connection with the ascertainment of mental ill-health and mental deficiency, with the provision of statutory supervision, etc. for mental defectives living in the community, and with the provision of after-care following treatment for mental illness. The Mental Welfare Officer for the District works from the Health Area Office, Launceston.

II Education Department : As local education authority, the County Council is responsible for the School Health Service, which provides the following :-

Periodic Medical Inspection of pupils
Cleanliness Surveys of pupils
Dental Inspection and Treatment of pupils
Ascertainment of handicapped pupils in need of special education
Treatment Clinics as follows :-

Dental Clinic - at the Health Clinic, Launceston and Wadebridge
Child Guidance - by arrangement at Launceston Child Guidance Clinic

III Welfare Department : This service is concerned with the welfare of the aged, and with that of various categories of handicapped persons. It is concerned also with the provision of temporary accommodation in certain circumstances for persons in urgent need thereof. The Welfare Officer for the district works from the Health Area Office, Launceston.

Hospital Services

The South Western Regional Hospital Board is the hospital authority for the area.

In-patient and out-patient facilities are provided by the Royal Cornwall Infirmary, Truro, the East Cornwall Hospital, Bodmin, Launceston Hospital and hospitals in Plymouth and elsewhere. Cases of infectious disease are admitted to the Scott Isolation Hospital, Plymouth, and the Isolation Hospital, Truro, and tuberculosis patients to Tehidy or Didworthy Sanatoria. Mental hospital accommodation is provided by St. Lawrence's Hospital and Laninvil House, Bodmin, and by Moorfields Hospital, Ivybridge, Devon.

An Orthopaedic Clinic is held weekly in Camelford, and physiotherapy clinics are held at Tavistock Hospital, Dawfield Hospital, Holsworthy and at Bodmin. Chest clinic sessions are held at Launceston Hospital and at the East Cornwall Hospital, Bodmin. An ophthalmic clinic for school and pre-school children is held periodically at the Health Clinic, Launceston and at Camelford. A specialist ante-natal clinic is held in Launceston weekly.

Laboratory Facilities

These are provided by the Public Health Laboratories, Exeter, and Plymouth, to which specimens for bacteriological examination are submitted.

SANITARY CIRCUMSTANCES OF THE DISTRICT

WATER SUPPLY

During 1965, the North Cornwall Water Board remained the authority responsible for water supplies throughout the whole of the Council's area. Towards the end of the year, however, the North and Mid Cornwall Water Draft Order was published. This foreshadowed the agreed regrouping of the undertakings of the North Cornwall Water Board, the Newquay and District Water Company, the Boroughs of Fowey and Lostwithiel and the Urban and Rural Districts of St. Austell.

WATER SAMPLES 1965

Bacteriological

(i) Public Piped Supplies

Ministry of Health Classification

District	Excellent Class 1	Satisfactory Class 2	Suspicious Class 3	Unsatisfactory Class 4

All samples taken by North Cornwall Water Board - no information received.

(ii) Private Supplies

Excellent Class I	Satisfactory Class 2	Suspicious Class 3	Unsatisfactory Class 4

Michaelstow	1	2
St. Juliot	1	
Trevalga	1	
Otterham	2	
St. Clether		2

5	4
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SEWERAGE AND SEWAGE DISPOSAL

Since 1950, the Council has provided modern sewage systems in the parishes and hamlets of Tintagel and Boscastle, having 3 sea outfalls which discharge directly into the Atlantic Ocean, but are all a considerable distance away from bathing beaches. The tidal currents do not cause any discharge of sewage on to the beaches. St. Beward, St. Teath, Delabole, Treknow and Camelford, including the hamlets of Trevia and Tregoodwell, all have modern sewage schemes and disposal works.

Difficulties with the Delabole Sewage Disposal Works, which had been under extensive investigation for some considerable time, led the Council to instruct its Consulting Engineers to prepare plans for the reconditioning of the works. Although in an advanced stage of preparation, these had not been completed by the end of the year.

Public Cleansing

A comprehensive scheme covering 95% of the properties in the district is in operation for the collection and disposal of all house and trade refuse.

Prevention of Damage by Pests Act, 1949.

During the year under review, some 794 properties were treated for rat and mice infestations and in addition the Council operated a scheme for the treatment of mole infestations. Contracts were made with local farmers for this service and a total of 55 farmers availed themselves of this service.

HOUSING

During the year some 397 inspections were made under the Public Health Acts, and some 12 houses were found to be in such a state as to be injurious to health and unfit for human habitation. Action was taken under Section 16 of the Housing Act, 1957 in respect of five houses.

Under the Housing Act 1949/59, five applications were received for Discretionary Grants involving an approved expenditure of £5785 towards which grants totalling £1535 were paid. During the year, there were sixteen applications for standard grants under the House Purchase and Housing Act, 1959, with a total approved expenditure of £2215 and grants made totalling £1962. During 1965, thirty-four new Council Houses were completed or in the course of completion. At the end of the year the Council's housing list contained the names of eighty-four applicants, showing a slight increase on the previous year, but several of these are from persons not resident in the district who wish to retire to the area.

NATIONAL ASSISTANCE ACTS, 1948 and 1951

Section 47 of the National Assistance Act, 1948 deals with the removal to suitable premises of persons in need of care and attention. It places on the Council the duty of securing the necessary care and attention for persons who :

- (a) are suffering from grave chronic disease or, being aged, infirm or physically incapacitated, are living in insanitary conditions, and
- (b) are unable to devote to themselves, and are not receiving from other persons, proper care and attention.

The action is taken on the certificate of the medical officer of health, and involves the making of an order, by a court of summary jurisdiction, for the removal of the person concerned to a suitable hospital or other place. The order is effective for up to three months and is renewable by the court for similar periods. It applies mainly to aged persons living in insanitary surroundings to whom the other conditions of the section apply, and is taken, as a rule, only after the failure of all efforts to persuade the individual to enter voluntarily some institution where the necessary care and attention are available.

The National Assistance (Amendment) Act, 1951, modified the procedure to allow of the removal of such persons in conditions of urgency on the order of a single magistrate after the submission of certificates by the Medical Officer of Health and one other medical practitioner, for a maximum period of three weeks. This period may be extended, if necessary, by the action laid down by Section 47 of the main Act.

It was unnecessary to take any action under these acts during the year.

INSPECTION AND SUPERVISION OF FOOD

1. Milk

The Milk (Special Designation) Regulations, 1960.

Under these Regulations, the County Council, as food and drugs authority, took over responsibility for the registration of distributors of milk throughout the County from 1st January, 1961.

The Milk (Special Designation) Regulations, 1963.

Under these regulations, the designation "Tuberculin Tested Milk" was discontinued from October, 1963, a period of three months being given in which to effect alterations in the labelling of bottles, etc. Tuberculin Tested milk is now designated as "Untreated", the designations pasteurised or sterilised milk remaining as before.

2. Ice-cream.

There are 36 premises registered for the sale and storage of ice-cream and of these only one manufactures the product. It is now possible for Local Authorities to exercise more stringent control over ice-cream manufacturers and, mainly due to the co-operation of the trade, the day of individual manufacture of ice-cream has disappeared in favour of the large manufacturers, who make the product on a national scale.

3. Condemnation of Unsound Food.

During 1965 the quantity of food condemned was as follows :-

	<u>Qtrs.</u>	<u>Lbs.</u>
Tinned Fruit Salad		7
Tinned Oranges		1½
Tinned Pears	1	13/16
Tinned Garden Peas	1	3/16
Tinned Ham	12	1/8
Tinned Beans		½
Tinned Peaches	1	13/16
Tinned Stewed Steak		2
		27 15/16

4. Meat Inspection

There are no licensed slaughterhouses in the district. The majority of home killed meat is supplied by the Launceston or Wadebridge Abattoirs where meat inspection is virtually one hundred per cent.

FACTORIES ACT, 1961

Classified List of Registered Factories as at
31st December, 1965.

	<u>Nature of Employment</u>	<u>Power</u>	<u>Non-power</u>
1.	Blacksmiths	-	1
2.	Motor Repairs, Garages	5	2
3.	Carpentry, Joinery and Sawmills	3	2
4.	Monumental Masons	-	-
5.	Plumbers	-	-
6.	Bakeries	1	-
7.	Coach Painters	-	-
8.	Granite Works	1	-
9.	Knitwear	1	3
10.	Bootmaker, Harness and Boot Repairs	-	-
11.	Pottery Manufacturing	2	-
12.	Cheese	1	-
13.	Processing Slate Granules	1	-
14.	Engineering	1	-
15.	Concrete Products	2	-
16.	Egg Packing and Grading	2	-
17.	Cabinet Maker	-	1
18.	Animal Foodstuffs	1	-
19.	Domestic Electrical Repairs	1	-
20.	Building Works	1	-

Prescribed Particulars on the Administration of the Factories Act, 1961, are attached as an appendix to this report in accordance with circular 1/60 of the Ministry of Health.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND
OTHER DISEASES.

The infectious diseases which are statutorily notifiable to the Medical Officer of Health are the following :- Smallpox, cholera, diphtheria, membranous croup, erysipelas, scarlet fever, typhus fever, typhoid fever, paratyphoid fever, relapsing fever, plague, poliomyelitis, tuberculosis, malaria, dysentery, puerperal pyrexia, ophthalmia neonatorum, acute primary pneumonia, acute influenzal pneumonia, whooping cough, measles, acute encephalitis, meningococcal infection, anthrax, leprosy and food poisoning.

The monthly incidence of infectious disease is shown in Table III.

Smallpox. No case was reported during the year, in the course of which 53 primary vaccinations and 7 re-vaccinations were carried out.

Diphtheria. No cases were notified during the year. 81 children received a complete course of primary immunisation, the triple antigen against diphtheria, whooping cough and tetanus being used in almost all cases. 292 children received booster injections.

Whooping Cough. No case of this infection was notified during the year.

Measles. Four isolated cases of measles were notified during the year.

Poliomyelitis. No case of this disease was notified during the year, in the course of which 92 persons received a complete course of oral vaccination.

Food Poisoning. No cases of food poisoning were notified during the year.

Tuberculosis

	Males		Females	
	Pul.	Non-Pul.	Pul.	Non-Pul.
Cases on Register 31.12.64	22	6	7	3
No. of cases notified during the year	3	-	-	-
Cases Restored	-	-	-	-
Inward Transfers	-	-	-	-
Cases Removed	7	-	1	-
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Total on Register 31.12.65	18	6	6	3
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No action was found to be necessary under the Public Health (Prevention of Tuberculosis) Regulations, 1925, in connection with persons suffering from pulmonary Tuberculous employed in the milk trade, or under Section 172 of the Public Health Act, 1936, which deals with the compulsory removal to hospital of persons suffering from tuberculosis.

The Regional Hospital Board is responsible for treatment of tuberculosis patients and the County Council for the prevention of spread of the disease and after-care of the patients.

Out-patients and contacts are seen by the Chest Physicians at the Chest Clinics at Launceston Hospital, and East Cornwall Hospital, Bodmin. The County Council Tuberculosis Health Visitors attend the Clinics, follow up the patients in their homes, trace contacts and sources of infection and thus acting as most valuable and essential "liaison officers" between the curative and preventive services, bridge a most alarming gap.

All susceptible contacts in the District are offered B.C.G. Vaccination, and most avail themselves of this method of protection.

The scheme for B.C.G. Vaccination of susceptible school children continued during the year, again with an excellent response.

OTHER DISEASES

Cancer of the Lung. The deaths of one male and one female from this cause were notified during the year. The total of lung cancer deaths since 1949 is now 30, 22 male and 8 female. During the same period, there have been 100 male and 127 female deaths from all forms of cancer.

Cancer of the Cervix. This type of cancer affects women, and affects the neck of the womb. Of recent years, a method has been evolved for the early detection of the condition before it reaches the cancerous stage, and when it is readily responsive to treatment. This process of early identification is known as cervical cytology, and involves the taking of smears from the tissue of the neck of the womb, which are examined microscopically at the Pathological Laboratory. The actual taking of the smear is completely painless.

In November, the County Council started a Cervical Cytology Clinic at Launceston to serve the whole of Health Area 6, which includes your Rural District. Two sessions were held before the end of the year, and the service has continued during the present year. There is no doubt that this service will prove of inestimable value, in the saving of life and the prevention of needless pain and invalidism.

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TABLE I
TUBERCULOSIS

Age and Sex Distribution of Cases and Deaths - 1965.

<u>Age Groups</u>	<u>New Cases</u>				<u>Deaths</u>			
	Pul.		Other		Pul.		Other	
	M	F	M	F	M	F	M	F
0 -	-	-	-	-	-	-	-	-
1 -	1	-	-	-	-	-	-	-
5 -	-	-	-	-	-	-	-	-
15 -	-	-	-	-	-	-	-	-
20 -	-	-	-	-	-	-	-	-
25 -	1	-	-	-	-	-	-	-
35 -	-	-	-	-	-	-	-	-
45 -	1	-	-	-	-	-	-	-
55 -	-	-	-	-	-	-	-	-
65 and over	-	-	-	-	1	1	-	-
Age unknown	-	-	-	-	-	-	-	-

TABLE II
VITAL STATISTICS

YEAR	POPULATION (Estimated)	BIRTHS		DEATHS			
		Number	Crude Rate	Under 1 year		All ages	
				Number	Rate	Number	Rate
1961	6,710	89	13.26	2	22.47	106	15.79
1962	6,870	98	14.26	2	20.40	112	16.30
1963	6,880	109	15.84	2	18.34	100	14.53
1964	6,960	94	13.505	-	-	89	12.787
1965	6,920	87	12.57	1	16.76	116	16.76

TABLE III
Monthly Incidence of Notifiable Diseases (Other than Tuberculosis)
Jan. Feb. Mar. Apr. May June July Aug. Sept. Oct. Nov. Dec. Total

Measles	-	-	-	-	1	2	-	1	-	-	-	-	4
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APPENDIX

FACTORIES ACT, 1961

Prescribed Particulars on the Administration of
the Factories Act, 1961.

Part 1 of the Act

1 - INSPECTIONS for purposes of provisions as to health

Premises	Number on Register	Number of		
		Inspections	Written Notices	Occupiers Prosecuted
(i) Factories in which Sections 1,2,3,4 and 6 are to be enforced by Local Authorities	7	16	-	-
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	21	19	-	-
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' Premises)	4	16	-	-
Total	32	51	-	-

2 - Cases in which DEFECTS were found

	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred		
			To H.M. Inspector	By H.M. Inspector	
Want of cleanliness (Section 1)					
Overcrowding (Section 2)					
Unreasonable temperature (Section 3)					
Inadequate Ventilation (Section 4)					
Ineffective drainage of floors (Section 6)					
Sanitary Conveniences (Section 7)					
(a) Insufficient					
(b) Unsuitable or defective					
(c) Not separate for sexes					
Other offences against the Act (Not including offences relating to outwork)					
Total					

PART VIII of the Act

Outwork

(Sections 133 and 134)

Nature of work	Section 133			Section 134		
	No. of out-workers in August list required by Section 110 (1) (c)	No. of cases of default in sending lists to the Council	No. of prosecu- tions for failure to supply lists	No. of instances of work in unwholesome premises	Notices served	Prosecution
Wearing apparel Making, etc.	5	-	-	-	-	-

